



## **Application Data Sheet**

### **Application Information**

Application number:: 09/548,883  
Filing Date:: 04/13/00  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R??::  
Number of CD disks::  
Number of copies of CDs::  
Sequence Submission::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: MULTI-ANALYTE DIAGNOSTIC TEST FOR  
THYROID DISORDERS  
Attorney Docket Number:: 02558B-063100US  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 5  
Small Entity?:: No  
Latin name::  
Variety denomination name::  
Petition included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers One::  
Secrecy Order in Parent Appl.: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Michael  
Middle Name:: I.  
Family Name:: Watkins  
Name Suffix::  
City of Residence:: Vacaville  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 4219 Rolling Hills Lane  
City of Mailing Address:: Vacaville  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 95688

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Suknan  
Middle Name:: S.  
Family Name:: Chang  
Name Suffix::  
City of Residence:: Oakland  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 131 Vernon Street, No. 4  
City of Mailing Address:: Oakland  
State or Province of mailing address:: CA

Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94610

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Philippines  
Status:: Full Capacity  
Given Name:: Renato  
Middle Name:: B.  
Family Name:: Del Rosario  
Name Suffix::  
City of Residence:: Benicia  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 900 Cambridge Drive, No. 146  
City of Mailing Address:: Benicia  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94510

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Patricia  
Middle Name:: A.  
Family Name:: Miranda  
Name Suffix::  
City of Residence:: Novato  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 45 Carnoustic Heights  
City of Mailing Address:: Novato

State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 94949

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Timothy  
Middle Name:: D.  
Family Name:: Knight  
Name Suffix::  
City of Residence:: Benicia  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 495 McCall Drive  
City of Mailing Address:: Benicia  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94510

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Richard  
Middle Name:: B.  
Family Name:: Edwards  
Name Suffix::  
City of Residence:: Cold Spring  
State or Province of Residence:: NY  
Country of Residence:: US  
Street of Mailing Address:: 562 East Mountain Road, North

City of Mailing Address:: Cold Spring  
State or Province of mailing address:: NY  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 10516

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number:: 20350

### **Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

### **Foreign Priority Information**

Country:: Application number:: Filing Date::

### **Assignee Information**

Assignee Name:: Bio-Rad Laboratories, inc.  
Street of mailing address:: 1000 Alfred Nobel Drive  
City of mailing address:: Hercules  
State or Province of mailing address:: California  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94547